

U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF <u>Thomas a. Wilcox</u>	COURT CASE NUMBER <u>CA07-739 GMS</u>
DEFENDANT <u>State of Delaware Etal</u>	TYPE OF PROCESS <u>OIE</u>

SERVE ➔	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN <u>JOSEPH R. Biden III</u>
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) <u>Carvel State office Bldg 820 N. French State Wilm DE 19801</u>

AT	
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SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

Thomas a. Wilcox SR
Sussex Correctional Institution
Rte 113
Po Box 500
Georgetown DE 19947

Number of process to be
served with this Form - 285Number of parties to be
served in this caseCheck for service
on U.S.A.SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All
Telephone Numbers, and Estimated Times Available For Service):

Fold

Fold

Pauper Case

Signature of Attorney or other Originator requesting service on behalf of:

Thomas a. Wilcox Jr☐ PLAINTIFF☐ DEFENDANT

TELEPHONE NUMBER

DATE

3-5-08**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE**I acknowledge receipt for the total
number of process indicated.
(Sign only first USM 285 if more
than one USM 285 is submitted)

Total Process

District
of OriginNo. 15District
to ServeNo. 15

Signature of Authorized USMS Deputy or Clerk

Date

HF3-14-08I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described
on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

LAURANCE Lewis STATE Solicitor

Address (complete only if different than shown above)

☐ A person of suitable age and dis-
cretion then residing in the defendant's
usual place of abode.

Date of Service

Time

am

3-24-082:10pm

Signature of U.S. Marshal or Deputy

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS:

2008 APR -1- AM 8:43

FILED
CLERK, U.S. DISTRICT COURT
DISTRICT OF DELAWARE